



SOUTHMAYD & MILLER

EB 6  
1220 Nineteenth Street, N.W.  
Suite 400  
Washington, D.C. 20036  
Telephone: (202) 331-4100  
Telecopier: (202) 331-4123

September 30, 1997

RECEIVED

VIA HAND DELIVERY

SEP 30 1997

FEDERAL COMMUNICATIONS COMMISSION  
OFFICE OF THE SECRETARY

Mr. William F. Caton  
Acting Secretary  
Federal Communications Commission  
1919 M Street, N.W., Room 222  
Washington, D.C. 20554

Re: K283AB  
Soldotna, AK

Dear Mr. Caton;

On behalf of Peninsula Communications, Inc., there is transmitted herewith, in triplicate, an FCC Form 303-S Application For Renewal of License for the above-referenced FM translator station.

No processing fee accompanies this application due to the fact a renewal application was filed for this FM translator in connection with the December 1, 1995 license renewal window.

Please contact the undersigned should you have any questions regarding this matter.

Very truly yours,

Peninsula Communications, Inc.

By

  
Jeffrey D. Southmayd

Its Attorney

Enclosures

FOR  
FCC  
USE  
ONLY

PN 10030437

**FCC 303-S**  
**APPLICATION FOR**  
**RENEWAL OF LICENSE**  
**FOR AM, FM, TV,**  
**TRANSLATOR OR**  
**LPTV STATION**

FOR COMMISSION USE ONLY

FILE NO.

9 109 30 YH

AM, FM and TV APPLICANTS MUST COMPLETE AND SUBMIT SECTIONS I, II, III AND V ONLY.

FM TRANSLATOR, TV TRANSLATOR and LPTV APPLICANTS MUST COMPLETE AND SUBMIT SECTIONS I, II, IV AND V ONLY.

IF APPLICATION IS FOR RENEWAL OF LICENSES FOR BOTH A PRIMARY STATION and A CO-OWNED TRANSLATOR WHICH REBROADCASTS THE PRIMARY STATION'S SIGNAL, APPLICANT MUST COMPLETE AND SUBMIT SECTIONS I, II, III, IV AND V.

**SECTION I (FEE INFORMATION) - TO BE COMPLETED BY ALL APPLICANTS**

**RECEIVED**

1. PAYOR NAME (Last, First, Middle Initial)

PENINSULA COMMUNICATIONS, INC.

MAILING ADDRESS (Line 1) (Maximum 35 characters)

P. O. BOX 109

MAILING ADDRESS (Line 2) (Maximum 35 characters)

FEDERAL COMMUNICATIONS COMMISSION  
OFFICE OF THE SECRETARY

CITY

HOMER

STATE OR COUNTRY (if foreign address)

ALASKA

ZIP CODE

99603-0109

TELEPHONE NUMBER (include area code)

(907) 235-6000

CALL LETTERS

K283AB

OTHER FCC IDENTIFIER (IF APPLICABLE)

2. A. Is a fee submitted with this application?

☐ Yes ☒ No

B. If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1112):

☐

Governmental Entity

☐

Noncommercial educational licensee

☒

Other (Please explain): FCC will waive  
filing fee because second  
renewal is within 26 months.

C. If Yes, provide the following information:

Enter in Column (A) the correct Fee Type Code for the service you are applying for. Fee Type Codes may be found in the "Mass Media Services Fee Filing Guide." Column (B) lists the Fee Multiple applicable for this application. Enter in Column (C) the result obtained from multiplying the value of the Fee Type Code in Column (A) by the number listed in Column (B).

(A)	(B)	(C)										
FEE TYPE CODE	FEE MULTIPLE (if required)	FEE DUE FOR FEE TYPE CODE IN COLUMN (A)	FOR FCC USE ONLY									
(1) <table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					\$ <table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td></tr></table>	

To be used only when you are requesting concurrent actions which result in a requirement to list more than one Fee Type Code.

(A)	(B)	(C)										
FEE TYPE CODE	FEE MULTIPLE (if required)	FEE DUE FOR FEE TYPE CODE IN COLUMN (A)	FOR FCC USE ONLY									
(2) <table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					\$ <table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td></tr></table>	

ADD ALL AMOUNTS SHOWN IN COLUMN C, LINES (1)  
AND (2), AND ENTER THE TOTAL HERE.  
THIS AMOUNT SHOULD EQUAL YOUR ENCLOSED  
REMITTANCE.

TOTAL AMOUNT  
REMITTED WITH THIS  
APPLICATION

\$ 

--

FOR FCC USE ONLY

--

SECTION II - TO BE COMPLETED BY ALL APPLICANTS

1. NAME OF LICENSEE OF AM, FM OR TV STATION	NAME OF LICENSEE OF FM OR TV TRANSLATOR OR LOW POWER TV STATION  PENINSULA COMMUNICATIONS, INC.
MAILING ADDRESS P. O. BOX 109	
CITY HOMER	STATE ALASKA
ZIP CODE 99603-0109	

2. This application is for: ☐ Commercial ☐ Noncommercial
- (a) ☐ AM ☐ FM ☐ TV

Call Letters	Community of License	
	City	State

- (b) ☒ FM Translator ☐ TV Translator ☐ Low Power TV

Call Letters K283AB	Area Licensed to Serve	
	City SOLDOTNA	State ALASKA

Call Letters	Area Licensed to Serve	
	City	State

3. Attach as an Exhibit an identification of any FM booster or TV booster station for which renewal of license is also requested.

Exhibit No.
-------------

4. Is the applicant in compliance with the provisions of Section 310 of the Communications Act of 1934, as amended, relating to interests of aliens and foreign governments?

☒ Yes ☐ No

If No, attach as an Exhibit an explanation.

Exhibit No.
-------------

5. Since the filing of the applicant's last renewal application or any other application for the subject station(s), has an adverse finding been made or final action been taken by any court or administrative body with respect to the applicant or parties to the application in a civil or criminal proceeding, brought under the provisions of any law relating to the following: any felony; mass media related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination?

☐ Yes ☒ No

If the answer is Yes, attach as an Exhibit a full disclosure concerning the persons and matters involved, including an identification of the court or administrative body and the proceeding (by dates and file numbers), and the disposition of the litigation. Where the requisite information has been earlier disclosed in connection with another application or as required by 47 U.S.C. Section 1.65(c), the applicant need only provide: (i) an identification of that previous submission by reference to the file number in the case of an application, the call letters of the station regarding which the application or Section 1.65 information was filed, and the date of filing; and (ii) the disposition of the previously reported matter.

Exhibit No.
-------------

6. Would a Commission grant of this application come within 47 C.F.R. Section 1.1307, such that it may have a significant environmental impact, including exposure of workers or the general public to levels of RF radiation exceeding identified health and safety guidelines issued by the American National Standards Institute?

☐ Yes ☒ No

NOTE: Licensees of FM translator stations transmitting with an effective radiated power (ERP) of 100 watts or less are not subject to the RF radiation requirements of 47 C.F.R. Section 1.1307(b).

If Yes, attach as an Exhibit an Environmental Assessment, as required by 47 C.F.R. Section 1.1311.

If No, explain briefly why not.

Exhibit No.
-------------

☒ Explanation attached

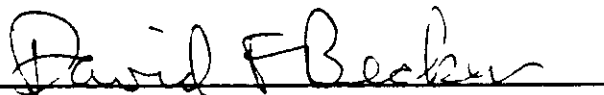
FM 105      FM 102      AM 620  
K-WAVE • KPEN • KGTL RADIO  
Contemporary Hits • Country • Soft Hits  
Homer ~ Kenai-Soldotna ~ Seward ~ Kodiak

SEPTEMBER 25, 1997

FCC 303-S SECTION II

QUESTION #6 - EXPLANATION

*I have examined the Commission's environmental requirements in 47 C.F.R. Section 1.1307 as outlined in Appendix C to the License Renewal Booklet. Based on my completion of the worksheets therein, I have determined that operation of my facilities will not have a significant environmental impact as defined by Section 1.1307, which includes consideration of the exposure of workers or the general public to levels of radio frequency radiation exceeding identified guidelines issued by the American National Standards Institute.*



DAVID F. BECKER, PRESIDENT

Peninsula Communications, Inc.  
P.O. Box 109 • Homer, AK 99603 • FAX 235-6683  
(907)235-6000 • 262-6000 • 224-6000 • 486-6000

**SECTION IV : TO BE COMPLETED BY FM TRANSLATOR, TV TRANSLATOR and LPTV APPLICANTS ONLY**

1. Is the applicant's station currently operating and rebroadcasting the signal of an FM, TV or LPTV station?

☒ Yes ☐ No

If Yes, identify the station being rebroadcast:

Call Sign	Channel No.	City of License/Area Served
KWVV-FM	278	HOMER, ALASKA

If No, attach as an Exhibit a statement of explanation, including the steps the applicant intends to take to resume operations.

Exhibit No.

2. Is the station being rebroadcast licensed to either the applicant or a commonly controlled entity?

☒ Yes ☐ No

If No, has the required retransmission consent been obtained?

☐ Yes ☐ No

If No, attach as an Exhibit an explanation.

Exhibit No.

3. Is the station being rebroadcast the same station as previously notified?

☒ Yes ☐ No

If No, attach as an Exhibit an explanation, including an identification of the station that was previously rebroadcast.

Exhibit No.

**4. FOR LOW POWER TV APPLICANTS ONLY:**

Have the Broadcast Station Annual Employment Reports (FCC Form 395-B) been filed with the Commission as required by 47 C.F.R. Section 73.3612?

☐ Yes ☐ No

If No, attach as an Exhibit an explanation.

Exhibit No.

**5. FOR FM TRANSLATOR APPLICANTS ONLY:**

(a) Is the applicant in compliance with 47 C.F.R. Section 74.1232(d) which prohibits the common ownership of a commercial primary station and an FM translator station whose coverage contour extends beyond the protected contour of the commercial primary station being rebroadcast? This restriction also applies to any person or entity having any interest in, or any connection with, the primary FM station.

☐ Yes ☒ No

If No, attach as an Exhibit an explanation.

Exhibit No.  
1

(b) Is the applicant in compliance with 47 C.F.R. Section 74.1232(e) which prohibits an FM translator station whose coverage contour extends beyond the protected contour of the commercial primary station being rebroadcast from receiving any support (except for specified technical assistance), before, during or after construction, directly or indirectly, from the primary station or any person or entity having any interest in, or any connection with, the primary station?

☐ Yes ☒ No

Exhibit No.  
1

If No, attach as an Exhibit an explanation.

**SECTION V: TO BE COMPLETED BY ALL APPLICANTS**

**FOR AM, FM OR TV APPLICANTS ONLY:** Applicant has attached Sections I, II, III, and V only.

☐ Yes ☐ No

**OR FM TRANSLATOR, TV TRANSLATOR OR LPTV APPLICANTS ONLY:** Applicant has attached Sections I, II, IV and V only.

☒ Yes ☐ No

**FOR CO-OWNED TRANSLATOR AND PRIMARY STATION APPLICANTS ONLY:** Applicant has attached Sections I, II, III, IV and V.

☐ Yes ☐ No

The APPLICANT hereby waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)


The APPLICANT acknowledges that all the statements made in this application and attached exhibits are considered material representations and that all the exhibits are a material part hereof and are incorporated herein as set out in full in the application.

**CERTIFICATION**

1. By checking Yes, the applicant certifies, that, in the case of an individual applicant, he or she is not subject to a denial of federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862, or, in the case of a non-individual applicant (e.g., corporation, partnership or other unincorporated association), no party to the application is subject to a denial of federal benefits that includes FCC benefits pursuant to that section. For the definition of a "party" for these purposes, see 47 C.F.R. Section 1.2002(b).

☒ Yes ☐ No

2. I certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

Name DAVID F. BECKER	Signature 
Title PRESIDENT	Date SEPTEMBER 25, 1997

**WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FOREFEITURE (U.S. CODE, TITLE 47, SECTION 503)).**

6

**EXHIBIT NO. 1**

**The applicant has an application pending before the Commission to assign the license for this translator to Coastal Broadcast Communications, Inc. See FCC File BALFT-970701TW. Accordingly, the applicant is proposing to divest the ownership of this translator and to bring the ownership thereof into compliance with the Commission's rules and policies.**



ORIGINAL

SOUTHMAYD & MILLER

1220 Nineteenth Street, N W  
Suite 400  
Washington, D C 20036  
Telephone (202) 331-4100  
Telecopier (202) 331-4123

November 22, 1995

Federal Communications Commission  
Mass Media Services  
P.O. Box 358195  
Pittsburgh, Pennsylvania 15251-5195

Dear Sirs;

Transmitted herewith, in triplicate, on behalf of Peninsula Communications, Inc. are FCC Form 303-S applications seeking license renewal for the following FM translators:

K257DB, Anchor Point/Seldovia, Alaska  
K272CN, Homer, Alaska  
K272DG, Seward, Alaska  
K274AB, Kodiak, Alaska  
K265CK, Kachemak City, Alaska  
K285AA, Kodiak, Alaska  
K285DU, Homer, Alaska  
K285EF, Kenai, Alaska  
K292ED, Kachemak City, Alaska  
K285EG, Seward, Alaska  
K283AB, Soldotna, Alaska

The application is accompanied by a check in the amount of \$495.00 in payment of the application processing fee and a four page FCC Form 159 Fee Remittance Advice.

Please contact the undersigned should you have any questions regarding this matter.

Very truly yours,

Peninsula Communications, Inc.

By: 

Jeffrey D. Southmayd

Its Attorney

Enclosures

FOR  
FCC  
USE  
ONLY

**FCC 303-S**  
**APPLICATION FOR**  
**RENEWAL OF LICENSE**  
**FOR AM, FM, TV,**  
**TRANSLATOR OR**  
**LPTV STATION**

FOR COMMISSION USE ONLY

FILE NO.

*BRFT-951124YU*

AM, FM and TV APPLICANTS MUST COMPLETE AND SUBMIT SECTIONS I, II, III AND V ONLY.

FM TRANSLATOR, TV TRANSLATOR and LPTV APPLICANTS MUST COMPLETE AND SUBMIT SECTIONS I, II, IV AND V ONLY.

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**SECTION I (FEE INFORMATION) - TO BE COMPLETED BY ALL APPLICANTS**

1 PAYOR NAME (Last, First, Middle Initial)												
Peninsula Communications, Inc.												
MAILING ADDRESS (Line 1) (Maximum 35 characters)												
P.O. Box 109												
MAILING ADDRESS (Line 2) (Maximum 35 characters)												
CITY		STATE OR COUNTRY (if foreign address)	ZIP CODE									
Homer		AK.	99603-0109									
TELEPHONE NUMBER (include area code)		CALL LETTERS	OTHER FCC IDENTIFIER (IF APPLICABLE)									
(907)-235-6000		K283AB										
2. A. Is a fee submitted with this application?			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
B. If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1112).												
<input type="checkbox"/> Governmental Entity <input type="checkbox"/> Noncommercial educational licensee <input type="checkbox"/> Other (Please explain):												
C. If Yes, provide the following information:												
Enter in Column (A) the correct Fee Type Code for the service you are applying for. Fee Type Codes may be found in the "Mass Media Services Fee Filing Guide." Column (B) lists the Fee Multiple applicable for this application. Enter in Column (C) the result obtained from multiplying the value of the Fee Type Code in Column (A) by the number listed in Column (B).												
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(1) <table border="1"><tr><td>M</td><td>A</td><td>F</td></tr></table>	M	A	F	<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					<table border="1"><tr><td>\$ 45.00</td></tr></table>	\$ 45.00	<table border="1"><tr><td></td></tr></table>	
M	A	F										
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<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					<table border="1"><tr><td>\$</td></tr></table>	\$	FOR FCC USE ONLY	
\$												
ADD ALL AMOUNTS SHOWN IN COLUMN C, LINES (1) AND (2), AND ENTER THE TOTAL HERE. THIS AMOUNT SHOULD EQUAL YOUR ENCLOSED SUBMITTANCE.												
TOTAL AMOUNT REMITTED WITH THIS APPLICATION			FOR FCC USE ONLY									
<table border="1"><tr><td>\$ 45.00</td></tr></table>			\$ 45.00	<table border="1"><tr><td></td></tr></table>								
\$ 45.00												

# SECTION II - TO BE COMPLETED BY ALL APPLICANTS

1 NAME OF LICENSEE OF AM, FM OR TV STATION	NAME OF LICENSEE OF FM OR TV TRANSLATOR OR LOW POWER TV STATION  Peninsula Communications, Inc.	
MAILING ADDRESS P.O. Box 109		
CITY Homer	STATE AK.	ZIP CODE 99603-0109

2. This application is for: ☒ Commercial ☐ Noncommercial

(a) ☐ AM ☐ FM ☐ TV

Call Letters	Community of License	
	City	State

(b) ☒ FM Translator ☐ TV Translator ☐ Low Power TV

Call Letters K283AB	Area Licensed to Serve	
	City Kenai & Soldotna	State AK.

Call Letters	Area Licensed to Serve	
	City	State

3. Attach as an Exhibit an identification of any FM booster or TV booster station for which renewal of license is also requested.

Exhibit No.

4. Is the applicant in compliance with the provisions of Section 310 of the Communications Act of 1934, as amended, relating to interests of aliens and foreign governments?

☒ Yes ☐ No

If No, attach as an Exhibit an explanation.

Exhibit No.

5. Since the filing of the applicant's last renewal application or any other application for the subject station(s), has an adverse finding been made or final action been taken by any court or administrative body with respect to the applicant or parties to the application in a civil or criminal proceeding, brought under the provisions of any law relating to the following: any felony; mass media related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination?

☐ Yes ☒ No

If the answer is Yes, attach as an Exhibit a full disclosure concerning the persons and matters involved, including an identification of the court or administrative body and the proceeding (by dates and file numbers), and the disposition of the litigation. Where the requisite information has been earlier disclosed in connection with another application or as required by 47 U.S.C. Section 1.65(c), the applicant need only provide: (i) an identification of that previous submission by reference to the file number in the case of an application, the call letters of the station regarding which the application or Section 1.65 information was filed, and the date of filing; and (ii) the disposition of the previously reported matter.

Exhibit No.

6. Would a Commission grant of this application come within 47 C.F.R. Section 1.1307, such that it may have a significant environmental impact, including exposure of workers or the general public to levels of RF radiation exceeding identified health and safety guidelines issued by the American National Standards Institute?

☐ Yes ☒ No

NOTE: Licensees of FM translator stations transmitting with an effective radiated power (ERP) of 100 watts or less are not subject to the RF radiation requirements of 47 C.F.R. Section 1.1307(b).

If Yes, attach as an Exhibit an Environmental Assessment, as required by 47 C.F.R. Section 1.1311.

Exhibit No.

If No, explain briefly why not.

☐ Explanation

*I have examined the Commission's environmental requirements in 47 C.F.R. Section 1.1307 as outlined in Appendix C to the License Renewal Booklet. Based on my completion of the worksheets therein, I have determined that operation of my facilities will not have a significant environmental impact as defined by Section 1.1307, which includes consideration of the exposure of workers or the general public to levels of Radio Frequency radiation exceeding identified guidelines issued by the American National Standards Institute.*

**SECTION IV : TO BE COMPLETED BY FM TRANSLATOR, TV TRANSLATOR and LPTV APPLICANTS ONLY**

1. Is the applicant's station currently operating and rebroadcasting the signal of an FM, TV or LPTV station?

☒ Yes ☐ No

If Yes, identify the station being rebroadcast:

Call Sign	Channel No.	City of License/Area Served
KWVV	278	Homer, AK

If No, attach as an Exhibit a statement of explanation, including the steps the applicant intends to take to resume operations.

Exhibit No.

2. Is the station being rebroadcast licensed to either the applicant or a commonly controlled entity?

☒ Yes ☐ No

If No, has the required retransmission consent been obtained?

☐ Yes ☐ No

If No, attach as an Exhibit an explanation.

Exhibit No.

3. Is the station being rebroadcast the same station as previously notified?

☒ Yes ☐ No

If No, attach as an Exhibit an explanation, including an identification of the station that was previously rebroadcast.

Exhibit No.

**4. FOR LOW POWER TV APPLICANTS ONLY:**

Have the Broadcast Station Annual Employment Reports (FCC Form 395-B) been filed with the Commission as required by 47 C.F.R. Section 73.3612?

☐ Yes ☐ No

If No, attach as an Exhibit an explanation.

Exhibit No.

**5. FOR FM TRANSLATOR APPLICANTS ONLY:**

(a) Is the applicant in compliance with 47 C.F.R. Section 74.1232(d) which prohibits the common ownership of a commercial primary station and an FM translator station whose coverage contour extends beyond the protected contour of the commercial primary station being rebroadcast? This restriction also applies to any person or entity having any interest in, or any connection with, the primary FM station.

☒ Yes ☐ No

If No, attach as an Exhibit an explanation.

Exhibit No.

(b) Is the applicant in compliance with 47 C.F.R. Section 74.1232(e) which prohibits an FM translator station whose coverage contour extends beyond the protected contour of the commercial primary station being rebroadcast from receiving any support (except for specified technical assistance), before, during or after construction, directly or indirectly, from the primary station or any person or entity having any interest in, or any connection with, the primary station?

☒ Yes ☐ No

If No, attach as an Exhibit an explanation.

Exhibit No.

EXHIBIT NO. 1

In approving the original construction permit and license for this translator, the Commission granted a request by Peninsula Communications, Inc. for a waiver of Sections 74.1232(d) and (e) of the rules. Peninsula is the licensee of KWVV(FM), Homer, Alaska. KWVV is the station that is rebroadcast on the subject translator. The translator operates outside the protected contour of KWVV. However, Peninsula is authorized by the Commission's waiver of Sections 74.1232(d) and (e) to operate the translator in its present mode.

LICENSE FOR AN  
FM BROADCAST TRANSLATOR/BOOSTER STATION

Call Sign: K283AB

Subject to the provisions of the Communications Act of 1934, subsequent acts, and treaties, and all regulations heretofore or hereafter made by this Commission, and further subject to conditions set forth in this license, the licensee is hereby authorized to use and operate the radio transmitting apparatus hereinafter described.

1. Name of Licensee .....: PENINSULA COMMUNICATIONS, INC.
2. License term ending 3 a.m. Local Time .....: APRIL 1, 1996
3. Principal community(ies) to be served .....: SOLDOTNA, ALASKA
4. Primary Station ~~ALL NAME AND ADDRESS CHANGES MUST BE FILED IMMEDIATELY WITH THE FCC. CHANGES IN OWNERSHIP MUST BE APPROVED BY THE FCC IN ADVANCE. A RENEWAL APPLICATION MUST BE FILED AT LEAST 4 MOS. BEFORE THIS LICENSE EXPIRES.~~ .....: KWVV-FM, CHANNEL 278, HOMER, AK
5. Via .....: DIRECT
6. Operating ~~assignment~~ .....: Channel No. 283 104.5 MHz
7. Hours of operation .....: Unlimited.
8. Transmitter .....: Type Accepted JONES, J-316 + J-319 + QE1, 675T510 AMPLIFIER
9. Transmitter power output .....: 100 watts (EACH OF 2 AMPLIFIER OUTPUTS) (0.258 KW ERP, DA MAXIMUM)
10. Transmitting antenna location .....: MILE 3.5, KENAI SPUR ROAD, ALASCOM RADIO RELAY SITE, SOLDOTNA, AK
11. North Latitude .....: 60 31 26  
West Longitude .....: 151 04 51
12. Transmitting Antenna .....: SCALA, HDCA-10, TWO 2-BAY TEN ELEMENT YAGI ARRAYS
13. Antenna supporting structure .....: MAST -MOUNTED ON A PLATFORM ATOP A STEEL TOWER
14. Overall height above ground .....: 96 meters (145 M=RCAMSL)
15. Main radiation lobe(s) oriented .....: ONE 2-BAY ARRAY @ 90 & 170 DEGREES, TRUE  
ONE 2-BAY ARRAY @ 235 & 300 DEGREES, TRUE
16. Obstruction marking specifications .....: In accordance with the following paragraphs of FCC Form 715 (attached): 1, 3, 12 and 21
17. Conditions .....: Not Applicable

The Commission reserves the right during said license period of terminating this license or making effective any changes or modification of this license which may be necessary to comply with any decision of the Commission rendered as a result of any hearing held under the rules of the Commission prior to the commencement of this license period or any decision rendered as a result of any such hearing which has been designated but not held, prior to the commencement of this license period.

This license is issued on the licensee's representation that the statements contained in licensee's application are true and that the undertakings therein contained, so far as they are consistent herewith, will be carried out in good faith. The licensee shall, during the terms of this license, render such service as will serve the public interest, convenience, or necessity to the full extent of the privileges herein conferred.

This license shall not vest in the licensee any right to operate the station nor any right in the use of the frequencies designated in the license beyond the term hereof, nor in any other manner than authorized herein. Neither the license nor the rights herein granted shall be transferred, assigned, or in any manner either voluntarily or involuntarily disposed of, or indirectly by transfer of control of the licensee, if a corporation, to any person without the written consent of the Commission. This license is subject to the right of use or control by the government of the United States conferred by Section 806 of the Communications Act of 1934.

Dated: APRIL 24, 1992

vlj

Chief, Auxiliary Services Branch

FEDERAL  
COMMUNICATIONS  
COMMISSION



FEDERAL COMMUNICATIONS COMMISSION  
**FEE PROCESSING FORM**

FCC/MELLON APR 10 1992

04-13-92 8200908 001

Please read instructions on back of this form before completing it. Section I MUST be completed. If you are applying for concurrent actions which require you to list more than one Fee Type Code, you must also complete Section II. This form must accompany all payments. Only one Fee Processing Form may be submitted per application or filing. Please type or print legibly. All required blocks must be completed or application/filing will be returned without action.

**SECTION I**

APPLICANT NAME (Last, first, middle initial)

PENINSULA COMMUNICATIONS, INC.

MAILING ADDRESS (Line 1) (Maximum 35 characters - refer to Instruction (2) on reverse of form)

P. O. BOX 109

MAILING ADDRESS (Line 2) (if required) (Maximum 35 characters)

APR 16 1992

CITY

HOMER

STATE OR COUNTRY (if foreign address)

ALASKA

ZIP CODE

99603

CALL SIGN OR OTHER FCC IDENTIFIER (if applicable)

K 283 AB

AUXILIARY SERVICES

Enter in Column (A) the correct Fee Type Code for the service you are applying for. Fee Type Codes may be found in FCC Fee Filing Guides. Enter in Column (B) the Fee Multiple, if applicable. Enter in Column (C) the result obtained from multiplying the value of the Fee Type Code in Column (A) by the number entered in Column (B), if any.

(A)	(B)	(C)	
FEE TYPE CODE	FEE MULTIPLE (if required)	FEE DUE FOR FEE TYPE CODE IN COLUMN (A)	FOR FCC USE ONLY
(1) M E F		\$ 85.00	

**SECTION II** — To be used only when you are requesting concurrent actions which result in a requirement to list more than one Fee Type Code.

(A)	(B)	(C)	
FEE TYPE CODE	FEE MULTIPLE (if required)	FEE DUE FOR FEE TYPE CODE IN COLUMN (A)	FOR FCC USE ONLY
(2)		\$	
(3)		\$	
(4)		\$	
(5)		\$	
ADD ALL AMOUNTS SHOWN IN COLUMN C, LINES (1) THROUGH (5), AND ENTER THE TOTAL HERE. THIS AMOUNT SHOULD EQUAL YOUR ENCLOSED MITTANCE.			
TOTAL AMOUNT REMITTED WITH THIS APPLICATION OR FILING			FOR FCC USE ONLY
\$			85.00

APPLICATION FOR AN

FM TRANSLATOR OR FM BOOSTER STATION LICENSE

<b>Commission Fee Use Only</b>	FEE NO:	<b>For Applicant Fee Use Only</b>  Is a fee submitted with this application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  If No, indicate reason therefor (check one box): <input type="checkbox"/> Nonfeeable application Fee Exempt (See 47 C.F.R. Section 1.1112) <input type="checkbox"/> Noncommercial educational licensee <input type="checkbox"/> Governmental entity
	FEE TYPE:	
	FEE AMT:	
	ID SEQ:	

RECEIVED APR 10 1992

RECEIVED SERVICES

<b>For Commission Use Only</b> File No. <b>BLFT-920410TA</b>
---

1. Name of Applicant  PENINSULA COMMUNICATIONS, INC.	Mailing Address P. O. BOX 109		
	City HOMER	State AK	Zip Code 99603
	Telephone No. (include area code) (907) 235-7551		

2. Facilities authorized by construction permit

This application is for: ☒ FM Translator

☐ FM Booster

all Sign: K 283 AB

3. Construction permit covered by this application

File Number BPFT-910513 TE	Date of Construction Permit Sept. 6, 1991	Construction began March 10, 1992	Construction completed April 4, 1992
-------------------------------	--	--------------------------------------	---

Is the station now in satisfactory operating condition and ready for regular operation?

☒ Yes ☐ No

If No, explain in attached Exhibit No. \_\_\_\_\_

For applicants that are not the licensee of the primary station, has written authority been obtained from the licensee of the station whose programs are to be retransmitted?

☐ Yes ☐ No

Apart from the apparatus constructed, have all the terms, conditions and obligations set forth in the above-described construction permit been fully met?

☒ Yes ☐ No

If No, state exceptions in attached Exhibit No. \_\_\_\_\_

4. Station Identification

Indicate how station identification will be made:

☐ FSK

☒ By Primary Station

☐ Amplitude Modulation of FM Aural Carrier

☐ Not Required

☐ Other (Specify)

Identification will be made by primary station, is current information on file with the primary station to your call letters, exact location of your station, and the name, address and telephone number of person to be contacted in an emergency to suspend operation of the translator?

☒ Yes ☐ No



United States of America  
FEDERAL COMMUNICATIONS COMMISSION

File No. BPFT-910513 TE  
K 285 DT/  
Call Sign K 283 AB

CONSTRUCTION PERMIT

FM BROADCAST TRANSLATOR/BOOSTER STATION

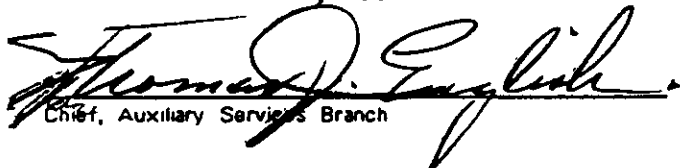
Subject to the provisions of the Communications Act of 1934, subsequent acts, and treaties, and all regulations heretofore or hereafter made by this Commission, and further subject to conditions set forth in this permit, the permittee is hereby authorized to construct a station hereinafter described.

1. Name of Permittee \_\_\_\_\_: PENINSULA COMMUNICATIONS, INC.
2. Principal community(ies) to be served \_\_\_\_\_: Soldotna, Alaska
3. Primary Station \_\_\_\_\_: KWVV-FM, Channel 278; Homer, AK
4. Via \_\_\_\_\_: Direct
5. Operating assignment \_\_\_\_\_: Channel No. 283      104.5 MHz
6. Hours of operation \_\_\_\_\_: Unlimited.
7. Transmitter \_\_\_\_\_: Type Accepted Jones, J-316 + J-319 + QEI, 675T150 Amplifier.
8. Transmitter power output \_\_\_\_\_: 100 watts (each of 2 amplifier outputs)  
(0.258 KW ERP; DA maximum)
9. Transmitting antenna location \_\_\_\_\_: Mile 3.5, Kenai Spur Road, Alascom Radio Relay Site, Soldotna, AK
10. North Latitude \_\_\_\_\_: 60° 31' 26"  
West Longitude \_\_\_\_\_: 151° 04' 51"
11. Transmitting Antenna \_\_\_\_\_: Scala, HDCA-10, two, 2-bay ten element yagi arrays,
12. Antenna supporting structure \_\_\_\_\_: mast-mounted on a platform atop a steel tower.
13. Overall height above ground \_\_\_\_\_: 96 meters      (145 M=RCMSL)
14. Main radiation lobe(s) oriented \_\_\_\_\_: One 2-bay array @ 90 & 170 degrees, True  
One 2-bay array @ 235 & 300 Degrees, True
15. Obstruction marking specifications \_\_\_\_\_: In accordance with the following paragraphs of FCC Form 715  
(attached): 1, 3, 12 and 21
16. Conditions \_\_\_\_\_: Not Applicable
17. Date of required completion of construction \_\_\_\_\_: MARCH 6, 1993

This permit DOES NOT AUTHORIZE OPERATION OF THE FACILITIES SPECIFIED HEREIN except for the conduct of EQUIPMENT TESTS pursuant to Section 74.13 of the Commission's Rules.

This permit shall be automatically forfeited if the station is not ready for operation within the time specified or within such further time as the Commission may allow for good cause shown.

SEPTEMBER 6, 1991

  
Chief, Auxiliary Services Branch

FEDERAL  
COMMUNICATIONS  
COMMISSION



SOUTHMAYD SIMPSON &amp; MILLER

P O Box 59711  
Potomac, Maryland 20859  
Telephone (301) 417-0635  
Telecopier (301) 977-2362

1233 Twenteth Street, N W  
Second Floor  
Washington, D C 20036  
Telephone (202) 331-4100  
Telecopier (202) 331-4123

May 6, 1991

Ms. Donna R. Searcy  
Secretary  
Federal Communications Commission  
1919 M Street, N.W.  
Washington, D.C. 20554

Dear Ms. Searcy;

Transmitted herewith, in triplicate, on behalf of Peninsula Communications, Inc. is an FCC Form 349 application seeking a modification in the output frequency for FM translator K285DT to Channel 283 at Soldotna, Alaska. The application is accompanied by a check in the amount of \$425.00 in payment of the application processing fee.

The Applicant is aware that there is a freeze on the filing of applications proposing new FM translators or major changes in the facilities of existing translators pursuant to Report And Order in MM Docket No. 88-140, 5 FCC Rcd 7212 (1990). This freeze will not presently be lifted until June 1, 1991 pursuant to the Commission's Order, DA 91-455 (released April 22, 1991).

Peninsula hereby respectfully requests a waiver of the Commission's rules and policies to allow for the filing and acceptance of this application in advance of the lifting of the freeze. The application proposes a necessary change in the output frequency of the FM translator in order to allow it to continue operation. Because of the limited construction season in the State of Alaska it is imperative that the Commission begin the processing of the application as soon as possible in order for construction on the station to commence prior to the on-set of Winter.

The Commission has long recognized the need for additional broadcast services in the State of Alaska. This need has evolved into a policy of granting liberal waivers of the Commission's broadcast rules, including in the context of applications for new FM translators and major changes in facilities of existing stations. See, Wrangell Radio Group, 75 FCC 2d 404 (1979). This policy has become known as the "Alaska Exception" for FM translator applications.

Letter to Ms. Donna R. Searcy  
May 6, 1991  
Page 2

Peninsula respectfully requests that its subject application be accepted for filing and processed in advance of the lifting of the FM translator application "freeze" under this policy. The public interest will be served by such a waiver in that it will allow Peninsula to continue to operate the FM translator and continue to help provide expanded broadcast services in the State of Alaska. Without a grant of the requested waiver it is doubtful that Peninsula will be able to modify the facilities of the subject FM translator until the Summer of 1992, and it may be forced to discontinue operation until that time.

Very truly yours,

Peninsula Communications, Inc.

By: 

Jeffrey D. Southmayd

Its Attorney

APPLICATION FOR AUTHORITY TO CONSTRUCT OR  
MAKE CHANGES IN AN FM TRANSLATOR OR FM BOOSTER STATION  
(Carefully read instructions before filling out form - RETURN ONLY FORM TO FCC)

Commission Fee Use Only	FEE NO:	For Applicant Fee Use Only  Is a fee submitted with this application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, indicate reason therefor (check one box). <input type="checkbox"/> Nonfeeable application Fee Exempt (See 47 C.F.R. Section 1.1112) <input type="checkbox"/> Noncommercial educational licensee <input type="checkbox"/> Governmental entity
	FEE TYPE:	
	FEE AMT:	
	ID SEQ:	

SECTION I - GENERAL INFORMATION

For Commission Use Only <b>BFT-910513 TE</b> File No.
---

1. Name of Applicant  PENINSULA COMMUNICATIONS, INC.	Address P.O. BOX 103		
	City HOMER	State AK	ZIP Code 99603
	Telephone No. (include area code) (907) 235-7551		

2 This application is for: (check one box)

☒ FM Translator ☐ FM Booster

A. Channel No. 283	B. Community of license: City SOLDOTNA State AK	
-----------------------	--	--

C. Check one of the following boxes:

- ☐ NEW Station
- ☐ MODIFICATION of Construction Permit (CP)  
(Check this box only if CP is not covered by an operating permit)
- File No. of Construction Permit: \_\_\_\_\_
- ☒ MAJOR CHANGE in licensed facilities; call sign: \_\_\_\_\_ K 285 DT
- ☐ MINOR CHANGE in licensed facilities; call sign: \_\_\_\_\_
- ☐ AMENDMENT of pending application

Application Reference No. \_\_\_\_\_

For amendments to a previously filed application, submit only Section I and those portions of the form that contain the amended information.

3 (a) To the applicant's knowledge, is this application mutually exclusive with a renewal application?

☐ Yes ☒ No

(b) To the applicant's knowledge, is this application mutually exclusive with another application(s)?

☐ Yes ☒ No

If the answer to question 3(a) or 3(b) is Yes, state the following information:

Call letters or File No.	Community of License	
	City	State
(a)		
(b)		

# SECTION 11 - ENGINEERING DATA AND ANTENNA AND SITE INFORMATION

## 1 Facilities requested:

(a) Output Channel No.	Transmitter Rated Power Output	Proposed Community(ies) to be served	
283	100 watts W	City SOLDOTNA	State AK

(b) Frequency 104.5 MHz \*\* SEE EXHIBIT A-1 & Attached LICENSE "K285DT"

Primary station (station to be rebroadcast)			
Call Sign KWVV-FM	City HOMER	State AK	Frequency 103.5 MHz

(c) Input Channel Frequency No. 278 Input Channel Frequency MHz 103.5  
If station is to operate via another translator station, indicate call sign and location of final intermediate translator

Call Sign \_\_\_\_\_ Location \_\_\_\_\_

## 2 Proposed transmitting antenna location:

City SOLDOTNA	State AK	County KENAI PENINSULA BOROUGH
Address or other description of location: MILE 3½, KENAI SPUR ROAD, ALASCOM RADIO RELAY SITE, SOLDOTNA, ALASKA		Geographical coordinates of transmitting antenna to nearest second North Latitude <u>60</u> . <u>31</u> . <u>26</u> . West Longitude <u>151</u> . <u>04</u> . <u>51</u> .

Attach as an Exhibit a map or maps (preferably topographic, if obtainable, such as Geological Survey quadrangles) of the area of the proposed transmitting antenna location shown drawn thereon the following data:

Exhibit No  
No Change

- a. Scale of kilometers  
b. Proposed transmitting antenna location accurately plotted.

3. Transmitter:	Make NO CHANGE IN LICENSED FACILITIES	Type No.	Output Power P kilowatts
4. Transmission line:	NO CHANGE IN EXISTING LICENSED FACILITIES meters		Length Rated efficiency E for length given (decimal fraction)

Transmitting antenna ☐ Directional "off-the-shelf" ☐ Directional Composite (Multiple Antennas) (Submit manufacturer's patterns) ☐ Non-Directional

Manufacturer		Model		Description 1
Orientation of main lobe 2 NO CHANGE	Overall structure height above ground 3 NO CHANGE meters	Elevation of Site 4 NO CHANGE meters	Power gain G (multiplier) in lobe of maximum radiation relative to a halfwave dipole 5 NO CHANGE	

Effective radiated power (ERP) (ERP=P X E X G) \_\_\_\_\_ kilowatts  
Height of antenna radiation center above mean sea level \_\_\_\_\_ meters

1 Give basic type using general descriptive terms such as half-wave dipole, "bow-tie" with screen, corner reflector, 10 element Yagi, 4 element in-phase array, two stacked 5 element Yagis, etc.

2 Show the direction of the main radiation lobe in degrees with respect to true north in a 360 degree horizontal azimuth, numbered clockwise, with true north as zero azimuth.

3 Show height to topmost portion of structure in meters, including highest top mounted antenna and beacon if any.

4 Show the ground elevation above mean sea level in meters at the base of the transmitting antenna supporting structure.

5 Give the actual power gain toward the radio horizon.

6. Attach as an Exhibit a vertical plan sketch for the proposed total structure(s), including supporting structure(s), giving height of center of radiation above ground, overall height of structure above ground, including lighting beacon (if any) and height above mean sea level in meters for all significant features for BOTH RECEIVING AND TRANSMITTING ANTENNAS. Also indicate any horizontal separation between receiving and transmitting antennas. **NO CHANGE IN LICENSED EXISTING FACILITIES**

Exhibit No.  
No Change

7. Will the proposed antenna supporting structure be shared with an AM radio station?

☐ Yes ☒ No

If yes, list the call signs and class of such stations.

8. Attach as an Exhibit a polar diagram of the radiation pattern (relative field) in the horizontal plane of the transmitting antenna showing clearly the correct relationship between the major lobe or lobes and the minor lobes of radiation and a tabulation of the pattern at every ten degrees and all maxima and minima. Applicants proposing use of multiple transmitting antennas shall submit a composite radiation pattern. If a non-directional transmitting antenna will be employed, i.e., an antenna with an approximately circular radiation pattern, check here and omit polar diagram and tabulation. If the antenna manufacturer and model number are on the Commission's list of common "off-the-shelf" directional antennas, check here and omit polar diagram and tabulation.

Exhibit No.  
No Change

**NO CHANGE IN LICENSED EXISTING FACILITIES**

9. Are there any terrain features between the proposed transmitting site and the community to be served which would interfere with line-of-sight transmission to any part of the principal community?

☐ Yes ☒ No

If the answer is "Yes", attach as an Exhibit a description of the extent of the area affected.

Exhibit No.  
No Change

10. Is the area to be served by the booster within its primary station's predicted 1 mV/m contour?

☐ Yes ☐ No

Submit as an Exhibit a map showing the primary station's predicted 1 mV/m contour. If the primary station is authorized with facilities in excess of those specified by Section 73.211 of the Commission's Rules, see Note to 47 C.F.R. 74.1231(h)

Exhibit No.  
N/A

11. For booster station applicants only, attach as an Exhibit a map (Sectional Aeronautical Chart or equivalent) that shows clearly, legibly, and accurately, and with latitude and longitude markings and a scale of distance in kilometers:

Exhibit No.  
N/A

(a) The proposed booster 1 mV/m contour; and

(b) the 1 mV/m contour of the licensed main facility with which the applied-for facility will be used

12. For booster station applicants only, supply terrain and coverage data (to be calculated in accordance with 47 C.F.R. Section 73.313)

Source of terrain data: (check only one box below)

☐ Linearly interpolated 30-second database (Source \_\_\_\_\_)

☐ 7.5 minute topographic map

☐ Other (briefly summarize)

Radial bearing (degrees True)	*	0	45	90	135	180	225	270	315
Height of radiation center above average elevation of radial from 3 to 16 km (meters)									
Predicted Distances of the 1 mV/m contour kilometers)									

\*Radial through principal community, if not one of the major radials. This radial should NOT be included in calculation of HAAT.

13. Has FAA been notified of proposed construction? **NO CHANGE IN EXISTING LICENSED FACILITY**  
 If Yes, give date and office where notice was filed: \_\_\_\_\_

☐ Yes ☒ No

14. Environmental Statement (See 47 C.F.R. Section 1.1301 et seq.)

Would a Commission grant of this application come within 47 C.F.R. 1.1307, such that it may have a significant environmental impact, including exposure to workers or the general public to harmful nonionizing radiation levels?

☐ Yes ☒ No

If you answer Yes, submit as an Exhibit an Environmental Assessment as required by Section 1.1311.  
 If no, explain briefly why not.

Exhibit No.  
No Change

This application changes only the output frequency  
 by 400 KHz from 104.9 MHz to 104.5 MHz. There are no other  
 changes proposed to the existing licensed facility.

15. Unattended operation:

Is unattended operation proposed?

☒ Yes ☐ No

(a) If Yes, and this application is for authority to construct a new station or to make changes in the facilities of an authorized station which proposes unattended operation for the first time, applicant must comply with the requirements of 47 C.F.R. Section 74.1234 (FM Translators) concerning unattended operation.

☒ Yes ☐ No

(b) In the space below state the name, address and telephone number of a person or persons who may be contacted in an emergency to suspend operation of the translator should such action be deemed necessary by the Commission.

Name	Address (street or other description)	City	State	Telephone No. (include area code)
DAVID BECKER	P.O. BOX 103	HOMER	AK	(907) 235-7551

16. Is type approved broadcast equipment being specified?

☒ Yes ☐ No

If No, indicate date equipment was submitted to FCC Laboratory for approval. \_\_\_\_\_

I certify that I represent the applicant in the capacity indicated below and that I have examined the foregoing statement of technical information and that it is true to the best of my knowledge and belief.

April 8, 1991

Date

Signature

*David F. Becker*

Typed or Printed Name

DAVID F. BECKER

Telephone No. (include area code)

(907) 235-7551

☐ Technical Director

☐ Registered Professional Engineer

☐ Consulting Engineer

☒ Chief Operator

☐ Other (specify)



# SECTION III - LEGAL QUALIFICATIONS

NOTE: Applicants for new stations only:

1. Applicant is (check one of the following):

☐ Individual

☐ General Partnership

☒ Corporation

☐ Other

☐ Limited Partnership

☐ Unincorporated Association

If the applicant is a legal entity other than an individual, partnership, corporation or unincorporated association, describe in an Exhibit the nature of the applicant.

Exhibit No  
N/A

## CITIZENSHIP AND OTHER STATUTORY REQUIREMENTS

2. (a) Is the applicant in compliance with the provisions of Section 310 of the Communications Act of 1934, as amended, relating to interests of aliens and foreign governments?

☒ Yes ☐ No

(b) Will any funds, credit, or other financial assistance for the construction, purchase or operation of the station(s) be provided by aliens, foreign entities, domestic entities controlled by aliens, or their agents?

☐ Yes ☒ No

If Yes, provide particulars as an Exhibit.

Exhibit No  
N/A

3. (a) Has an adverse finding been made, or an adverse final action taken by any court or administrative body as to the applicant or any party to this application in a civil or criminal proceeding brought under the provisions of any law related to the following: any felony; broadcast-related antitrust or unfair competition; criminal fraud or fraud before another governmental unit; or discrimination?

☐ Yes ☒ No

(b) Is there now pending in any court or administrative body any proceeding involving any of the matters referred to in 3(a)?

☐ Yes ☒ No

If the answer to 3(a) or 3(b) is Yes, attach as an Exhibit a full disclosure concerning the persons and matters involved, including an identification of the court or administrative body and the proceeding (by dates and file numbers), a statement of the facts upon which the proceeding was based or the nature of the offense alleged or committed, and a description of the current status or disposition of the matter.

Exhibit No.  
N/A

4. Has the applicant or any other party to this application had any interest in:

(a) a broadcast application which has been dismissed with prejudice by the Commission?

☐ Yes ☒ No

(b) a broadcast application which has been denied by the Commission?

☐ Yes ☒ No

(c) a broadcast station, the license for which has been revoked?

☐ Yes ☒ No

(d) a broadcast application in any Commission proceeding which left unresolved character issues against the applicant?

☐ Yes ☒ No

If the answer to any of the questions in 4 is Yes, state in an Exhibit the following:

(i) Name of party having interest;

(ii) Nature of interest or connection, giving dates;

(iii) Call letters of stations or file number of application or docket number;

(iv) Location.

Exhibit No.  
N/A

## REAL PARTY IN INTEREST

5. The applicant certifies that no agreement, either explicit or implicit, has been entered into for the purposes of transferring or assigning to another party any station construction permit or license or interest therein that awarded as a result of a random selection or lottery.

☒ Yes ☐ No

If No, this application cannot be accepted for filing. See 47 C.F.R. Section 74.1232.

# SECTION IV - CERTIFICATIONS

1. The applicant certifies that sufficient net liquid assets are on hand or are available from committed sources to construct and operate the requested facilities for three months without revenue. ☐ Yes ☐ No
2. The applicant certifies that: (a) it has a reasonable assurance of a present firm intention for each agreement to furnish capital or purchase capital stock by parties to this application, each loan by banks, financial institutions or others and each purchase of equipment on credit; (b) it can and will meet all contractual requirements as to the collateral, guarantees, and capital investment; (c) it has determined that a reasonable assurance exists that all such (excluding banks, financial institutions and equipment manufacturers) have sufficient net liquid assets to meet these commitments. ☐ Yes ☐ No

Note: If this application is for a change in an operating facility, you DO NOT need to respond to Questions 1 and 2.

3. The applicant, if for a new FM translator station, certifies that it has not received any funds, legal or engineering services or anything else of value, directly or indirectly from the licensee or permittee of any FM broadcast station or any person associated with such station. See 47 C.F.R. Section 74.1232. ☒ Yes ☐ No

If Yes, attach as an Exhibit an explanation identifying the source and nature of the financial support or assistance.

Exhibit No.  
A-6

4. For applicants proposing translator rebroadcasts who are not the licensee of the primary station, the applicant certifies that written authority has been obtained from the licensee of the station whose programs are to be retransmitted. ☐ Yes ☐ No

Primary station proposed to be rebroadcast:

Call Sign	City	State	Channel No.
KWVV-FM	HOMER	AK	278

5. The applicant certifies that it has contacted an authorized spokesperson for the owner of the rights to the proposed transmitter site, and has obtained reasonable assurance that the site will be available for its use if this application is granted. ☒ Yes ☐ No

That person can be contacted at the following address and telephone number:

Name	Dennis Adamson			Mailing Address or Identification
				P. O. BOX 196607
City	State	ZIP Code	Telephone No. (include area code)	
Anchorage	AK	99519-6607	(907) 264-7000	

6. For new station and major change applications only, the applicant certifies that it has or will comply with the public notice requirements of 47 C.F.R. Section 73.3580. ☒ Yes ☐ No

THE ORIGINAL OF THIS APPLICATION FORM MUST BE SIGNED BY THE APPLICANT. THE REQUIRED COPIES CAN BE CONFORMED. SEE 47 C.F.R. SECTION 73.3513.

The APPLICANT hereby waives any claim to the use of any particular frequency as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)

The APPLICANT acknowledges that all statements made in this application and attached exhibits are considered material representations, and that all exhibits are a material part hereof and incorporated herein.

The APPLICANT represents that this application is not filed for the purpose of impeding, obstructing, or delaying determination on any other application with which it may be in conflict.

In accordance with 47 C.F.R. Section 1.85, the APPLICANT has a continuing obligation to advise the Commission, through amendments, of any substantial and significant changes in information furnished.

WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND IMPRISONMENT.  
U.S. CODE, TITLE 18, SECTION 1001.

I certify that the statements in this application are true, complete and correct to the best of my knowledge and belief, and are made in good faith.

Name of Applicant	PENINSULA COMMUNICATIONS, INC.	Signature	David F Becker
Title	David F. Becker, President	Date	April 8, 1991

EXHIBIT A-1

Peninsula Communications, Inc. (PCI) is currently the licensee of FM Translator station "K285DT" which serves the communities of Kenai and Soldotna, Alaska. The purpose of this application is to change the output frequency from 104.9 Mhz to 104.5 Mhz. This translator is located approximately 3 miles from Soldotna and about 8 miles from Kenai. The signal provides adequate coverage for Soldotna but is marginal for Kenai. Therefore, PCI proposes to license this FM translator station only to Soldotna and will be simultaneously filing with the FCC for an additional FM translator station Construction Permit to build a new FM translator station to serve Kenai on the vacated frequency of 104.9 Mhz. There are no other changes to the existing licensed facilities of K285DT, other than the proposed frequency change to 104.5 Mhz. The proposed frequency of 104.5 Mhz is completely clear with no co-channel or adjacent channel stations either above or below 104.5 Mhz within at least 200 miles. Second adjacent channel stations would be KKLV(FM) in Anchorage at 104.1 Mhz (over 65 miles distant), and our new proposed FM translator station to Kenai on 104.9 Mhz. The next FM station higher in frequency would be in Anchorage, KNIK(FM) on 105.3 Mhz. PCI believes there would be absolutely no interference problems as a result of the proposed frequency change. This is because the Anchorage stations do not have sufficient signal from 65 miles away to serve the Kenai-Soldotna area. There are currently two channels of separation between our FM translator on 104.9 Mhz and KNIK on 105.3 Mhz. The addition of another translator signal on 104.5 Mhz will still maintain two channels of separation from KKLV on 104.1 Mhz. PCI believes this fully complies with FCC Rules, Section 74.1202 regarding frequency assignments for FM translator stations, which "are not likely to cause interference to the reception of other stations".

United States of America  
Federal Communications Commission

File No.. BLFT-870825TC

License For a  
Broadcast Translator Station

Call Sign K285DT

Subject to the provisions of the Communications Act of 1934, subsequent acts, and treaties, and all regulations heretofore or hereafter made by this Commission, and further subject to conditions set forth in this license, the licensee is hereby authorized to use and operate the radio transmitting apparatus hereinafter described

- 1 Name of Licensee . . . . . PENINSULA COMMUNICATIONS, INC.
- 2 License term ending 3 a.m. Local Time . . . . . APRIL 1, 1989
- 3 Principal community to be served . . . . . KENAI AND SOLDOTNA, AK
- 4 Primary station . . . . . KGTL-FM CH 278, HOMER, AK
- 5 Via . . . . . DIRECT
- 6 Operating assignment . . . . . Channel 285, 104.9 Mhz
- 7 Hours of operation . . . . . Unlimited
8. Transmitter . . . . . JONES, J-316 + J-319 + QEI 675T150 AMPLIFIER
- 9 Transmitter power output . . . . . 100 watts each output
10. Transmitting antenna location . . . . . MILE 3½, KENAI SPUR ROAD, ALASCOM RADIO RELAY SITE, SOLDOTNA, AK
11. North Latitude . . . . . 60 31 57  
West Longitude . . . . . 151 04 51
- 12 Transmitting Antenna . . . . . HDCA-10, SCALA, TEN ELEMENT YAGIS, STACKED,
13. Antenna supporting structure . . . . . SKEWED ARRAY, MAST MOUNTED ON A PLATFORM ON A STEEL TOWER
- 14 Overall height above ground . . . . . 315 FEET
- 15 Main radiation lobe oriented . . . . . 90, 170, 235, and 300 DEGREES, T
- 16 Obstruction marking specifications . . . . . In accordance with the following paragraphs of FCC Form 715 (attached)
- 17 Conditions . . . . . N/A 1, 3, 12, and 21

The Commission reserves the right during said license period of terminating this license or making effective any changes or modification of this license which may be necessary to comply with any decision of the Commission rendered as a result of any hearing held under the rules of the Commission prior to the commencement of this license period or any decision rendered as a result of any such hearing which has been designated but not held, prior to the commencement of this license period

This license is issued on the licensee's representation that the statements contained in licensee's application are true and that the undertakings therein contained, so far as they are consistent herewith, will be carried out in good faith. The licensee shall, during the terms of this license, render such service as will serve public interest, convenience, or necessity to the full extent of the privileges herein conferred

This license shall not vest in the licensee any right to operate the station nor any right in the use of the frequencies designated in the license beyond the term hereof, nor in any other manner than authorized herein. Neither the license nor the rights herein granted shall be transferred, assigned, or in any manner either voluntarily or involuntarily disposed of, or indirectly by transfer of control of the licensee, if a corporation, to any person without the written consent of the Commission. This license is subject to the right of use or control by the Government of the United States conferred by Section 806 of the Communications Act of 1934

Dated 9/2/87  
Zm

Federal  
Communications  
Commission

FCC FORM 349

April 8, 1991

EXHIBIT A - 6

PENINSULA COMMUNICATIONS, INC. IS BOTH THE LICENSEE OF THE  
STATION TO BE REBROADCAST (KWVV-FM) AND THE APPLICANT.